24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Our Principles PAC	C C00603621	
Check if X 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	
DDC Advocacy	01 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 805 15th Street, N.W.	Amount	
Suite 300		
City State Zip Code Washington DC 20005	28093.86 Transaction ID : SE.4146	
	Date of Disbursement or Obligation	
Purpose of Expenditure Direct mail services Category/ Type	M = M / D = D / Y = Y = Y = Y	
Name of Federal Candidate Support Office	Sought: House District:	
Donald L Trump	President Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought Disbur 2016	rsement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
DDC Advocacy	01 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 805 15th Street, N.W.	Amount	
Suite 300		
City State Zip Code	77462.88	
Washington DC 20005	Transaction ID : SE.4152 Date of Disbursement or Obligation	
Purpose of Expenditure Direct mail services Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	Sought: House District:	
Donald I Trump	President Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	rsement For:	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Jamie Jodoin [Electronically Filed] Date 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼	
Our Principles PAC	C C00603621	
Check if X 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee Date of	Public Distribution/Dissemination	
	M / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 805 15th Street, N.W. Amount		
Suite 300		
City State Zip Code Washington DC 20005 Transac	14051.00 ction ID : SE.4186	
Date of	Disbursement or Obligation	
Purpose of Expenditure Digital advertising Category/ Type	M / D D / Y Y Y Y	
Name of Federal Candidate Support Office Sought:	House District:	
Donald J. Trump Donald J. Trump Oppose Presiden		
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016 Oth	For:	
	Public Distribution/Dissemination	
Mailing Address Amount		
Amount		
City State Zip Code		
	Disbursement or Obligation	
Purpose of Expenditure Category/ Type	M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office Sought:	House District:	
Oppose Presiden	nt Senate State:	
Calendar Year-To-Date Disbursement	For: Primary General	
Per Election for Office Sought Oth	ner (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures		
	7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	7	
(c) TOTAL Independent Expenditures	119607.74	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Jamie Jodoin [Electronically Filed] Date 01	26 2016	
Signature		